PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

10748973

CLAIMS AS FILED - PART I								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Column 1)		(Column 2)				<u> </u>	OR			
TOTAL CLANVIS			(8				L F	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			18 minus 20=		* 0		>	(\$ 9=		OR.	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		* 0		>	K43=		OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT	ESENT				145=	·	OR	+290=		
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	column 2		OTAL	385	OR	TOTAL		
CLAIMS AS AMENDED - PART II										•	OTHER	THAN	
		(Column 1)	(Column			(Column 3)		SMALL ENTITY		OR	SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***			X	43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT. FEE		
ADDIT. FEE													
AMENDMENT B		CLAIMS		HIGHE	ST				ADDI-			ADDI-	
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=	. x	\$ 9=		OR	X\$18=		
	Ind pendent	*	Minus	***		=	×	43=		OR	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	45=		OR	+290=		
										L	TOTAL		
ADDIT. FEE OR ADDIT. FEE													
(Column 1) (Column 2) (Column 3)													
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ÉR USLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	X	9=		OR	X\$18=		
	Independent	*	Minus	***	_	=	X4	43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* 11	* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3.									OR	+290=		
**	f the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."		TOTAL T. FEE	<u> </u>	OR ,	TOTAL DDIT. FEE		
		mber Previously Paid					found in	the app	ropriate box	in col	ımn 1.		